

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 18 19a 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
AUGUST WOLF FOR SENATE

Full Name (Last, First, Middle Initial) A. METRO NORTH		Date of Disbursement MM / DD / YYYY 05 / 26 / 2015	
Mailing Address 420 LEXINGTON AVE			
City NEW YORK	State NY	Zip Code 10017	Amount of Each Disbursement this Period 93.50
Purpose of Disbursement TRAVEL: RAIL		<input type="checkbox"/> Memo Item	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		
State: District:	Transaction ID : SB17.8113		

Full Name (Last, First, Middle Initial) B. NORWALK REPUBLICAN TOWN COMMITTEE		Date of Disbursement MM / DD / YYYY 06 / 01 / 2015	
Mailing Address INFORMATION REQUESTED			
City NORWALK	State CT	Zip Code 99999	Amount of Each Disbursement this Period 375.00
Purpose of Disbursement EVENT REGISTRATION FEE: TO BE REFUNDED		<input type="checkbox"/> Memo Item	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		
State: District:	Transaction ID : SB17.8145		

Full Name (Last, First, Middle Initial) C. O'Pro Home Improvement		Date of Disbursement MM / DD / YYYY 05 / 27 / 2015	
Mailing Address 253 Spring Street			
City Ossining	State NY	Zip Code 10562	Amount of Each Disbursement this Period 1050.56
Purpose of Disbursement OFFICE EQUIPMENT		<input type="checkbox"/> Memo Item	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		
State: District:	Transaction ID : SB17.8126		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

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